

EDITORIAL

Medicine and philosophy: back to the antiquity

Mario De Caro

Università degli Studi Roma Tre, Rome, Italy and Tufts University, Medford, MA, USA

In the antiquity, and through the Middle Ages to the Renaissance, the connection between medicine and philosophy was very tight: Galenus, Avicenna, Paracelsus, Cardanus were, at the same time, famous physicians and philosophers. They investigated the human body from a perspective that was naturalistic and vitalistic, by using now-obsolete notions like final causes, virtues, humors and fluids. However, in the XVII century, after the victory of the so-called “iatromechanic medicine” (that is, a medicine that was based on a mechanistic view of human anatomy and functions), things changed dramatically and medicine got much closer to the natural sciences than to philosophy. So, how is it possible that today many scholars are revitalizing the connection between medicine and philosophy?

There are three main answers to this question. The first, the most obvious, is that with its portentous progress, medicine continuously raises new deep ethical dilemmas. What are the moral limits of the application of genetic engineering to human embryos? Is it acceptable to map people's genome and use publicly the resulting data? What are the ethical boundaries of neurosurgery? What are the fairest ways of allocating organs for transplantation? And so on. Bioethics, neuroethics, medical ethics are only some of the new flourishing disciplines that deal with the many moral issues raised by medicine.

The second reason of the contemporary return of interest for the relationship between medicine and philosophy is epistemological, *i.e.*, it concerns the ways in which medicine can give us knowledge and understanding. In what sense, if any, for example, is medicine a natural science like chemistry, geology, or biology? Should doctors be more concentrated on specific organic dysfunctions or on the holistic condition of the organism? Other important epistemological questions regarding medicine include the clinical value of popu-

lation statistics, blind experiments, placebo-controlled studied, and randomization.

The third reason of why medicine is getting closer to philosophy again is the growing attention that today is given to medical ontology, that is, to the investigation of what exactly the entities and processes described, explained, and predicted by medicine are. To make a couple of controversial examples, does the narcissistic personality disorder have a uniform physiological correspondent in different patients? And is the dynamic or Freudian unconscious a real entity?

To make a more general example, many studies in cognitive neuroscience state today that between a determinate conscious phenomenon (like pain, anxiety, or the sense of self-control), on the one hand, and such-and-such neurological processes, on the other hand, there are interesting statistical correlations. Well, what is the meaning of these correlations? Are the mental phenomena and the corresponding neural processes just the same thing, described from two different points of view? Or the mental level is just apparent but does not have any reality? Or is there a bottom-up (or even a top-down) relation of causation between the two levels? And also in this case the list of questions could continue indefinitely.

Today the huge progress of medicine raises big ethical, epistemological, and ontological questions that obviously interest philosophers – at least those with a naturalistic orientation, *i.e.* those who believe that philosophy should not be pursued in disconnection with science. In turn, medicine can get interesting methodological and conceptual inputs from the best studies in philosophy of medicine.

The close relation between medicine and philosophy is back. At least in this sense, we are back to the antiquity.